

## SENDER: COMPLETE THIS SECTION

## COMPLETE THIS SECTION ON DELIVERY

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Alfred G. Ostowicz  
 197 Lawson Lane  
 Many, LA 71449

A. Received by (Please Print Clearly)

B. Date of Delivery

C. Signature

 Agent AddresseeD. Is delivery address different from item 1?  YesIf YES, enter delivery address below:  No

3. Service Type

 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number (Copy from service label)

7002 0510 0003 4362 5921

PS Form 3811, July 1999

Domestic Return Receipt

102595-99-M-1789